FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 MAR 132009

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

357875	OMB APPROVAL					
OMMISSION	OMB Number: Expires: Estimated average	3235-0076 April 30, 2008				

Prefix

burden hours per response: 16.00

SEC USE ONLY

DATE RECEIVED

Serial

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)	
EJF Opportunity Offshore Fund, Ltd.: Shares	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐	☐ Section 4(6) ☐ ULOE
Type of Filing: ☑ New Filing □ Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
EJF Opportunity Offshore Fund, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephoi.
2107 Wilson Blvd. #410, Arlington, VA 22201	(703) 875-0591
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Gode)
(if different from Executive Offices)	LKOCESSED
Brief Description of Business	MAR 2 7 2009
Private Investment Vehicle	
Type of Business Organization	other (please specify) RFUIERS
☐ corporation ☐ limited partnership, already formed	✓ other (please specify
☐ business trust ☐ limited partnership, to be formed	Exempted Limited Company
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 8 0 5	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviate	tion for
State: CN for Canada; FN for other foreign jur	
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GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
* Each promoter of the issuer, if the issuer has been organized within the past five years;									
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: ☐ Promoter* ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or *Issuer's Investment Manager									
Full Name (Last name first, if individual)									
EJF Opportunity GP, LLC									
Business or Residence Address (Number and Street, City, State, Zip Code)									
2107 Wilson Blvd. #410, Arlington, VA 22201									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) Wilson, Neal									
Business or Residence Address (Number and Street, City, State, Zip Code)									
2107 Wilson Blvd. #410, Arlington, VA 22201									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Friedman, Emanuel									
Business or Residence Address (Number and Street, City, State, Zip Code)									
2107 Wilson Blvd. #410, Arlington, VA 22201									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									

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[B. IN	FORMAT	ION ABO	OUT OFFI	ERING				
						11. 1.1	4	- 6°! 0			Yes	No
1. Has th	e issuer sole	d, or does th	ne issuer into					=			0	Ø
Answer also in Appendix, Column 2, if filing under ULOE.												
										\$500	0,000*	
*The minimum initial subscription by a prospective purchaser of Shares is U.S. \$500,000 for individuals and U.S. \$1.0 million for institutions. However, the Company may accept investments for Shares for lesser amounts, in the sole discretion of the Board of Directors, provided that no subscription shall be for less than U.S. \$50,000 (or such other amount as specified by Cayman Islands law).									Yes	No		
3. Does t	he offering	permit join	t ownership	of a single	unit?	***************************************					Ø	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
N 1	•	·	ŕ									
None Business of	or Residence	e Address ()	Number and	Street, Cit	v. State. Zir	Code)				··		
					,,,	,						
Name of A	Associated F	Broker or De	ealer				 -					
			s Solicited									
•			lividual Stat	•								ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL) [MT]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	: (Last name			[111]	[01]		[,	[]	[,,,]	<u> </u>	[]	11
Business of	r Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated F	Broker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Check ".	All States"	or check inc	lividual Stat	es)	• • • • • • • • • • • • • • • • • • • •						🗆 AI	I States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	(Last name			[17]	[OI]	[+ +]		[11.]	[,, ,]	[,, ,]		[[1,11]
	·											
Business of	r Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	ealer							·		
			s Solicited									All States
[AL]	[AK]	[AZ]	lividual Stat [AR]	.es) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[KL]	[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[BD] [MD]	[MA]	[M]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[r _N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			/TT 11 1									

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	_	\$	
	Equity			\$	795,768
	□ Common □ Preferred	_		•	
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests				
	Other (Specify	S		s	
	Total	s –	795.768	S	795,768
	Answer also in Appendix, Column 3, if filing under ULOE.	* –		. •	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors	_	4	. \$	795,768
	Non-accredited Investors	_	0	. \$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		<i>T</i> . 6		Dellas Assessat
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504	_	N/A	\$	N/A
	Total	_	N/A	\$	N/A
ti ti	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_		_	
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		Ø	\$	149.00
	Accounting Fees		0	\$	0
	Engineering Fees		. 0	\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)		0	\$	0
	Total*		⋈	\$	149.00

	C. OFFERING PRICE,	NUMBER OF IN	VESTORS, EXP	ENS	ES A	ND USE OF PI	ROCE	EDS	
	 b. Enter the difference between the aggre Question 1 and total expenses furnished difference is the "adjusted gross proceeds total" 	l in response to Par	t C - Question 4.a.	. Thi	is		\$_		795,619
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.									
						Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		••••••		\$_		. 🗆	\$ _	
	Purchase of real estate			0	\$ _			\$_	
	Purchase, rental or leasing and installation	of machinery and eq	uipment		\$_			s _	
	Construction or leasing of plant buildings a	and facilities			\$_			\$_	
	Acquisition of other businesses (including this offering that may be used in excharanother issuer pursuant to a merger)	nge for the assets of	or securities of	_	•		_	c	
	•			_	_	<u>.</u> .	•	3	-
	Repayment of indebtedness				_			\$	
	Working capital	•••••			\$ _		Ø	\$ _	795,619
	Other (specify								
					·\$_			\$	
	Column Totals	••••••			\$_			\$_	795,619
	Total Payments Listed (column totals added	i)(i		*******		□ \$	795	,619	
		D. FEDE	RAL SIGNATUI	₹E					· ·-
fc	he issuer has duly caused this notice to be ollowing signature constitutes an undertaking fits staff, the information furnished by the is	g by the issuer to fur	rnish to the U.S. Se	curiti	es an	d Exchange Comm	nission,	upon	
	er (Print or Type)	Signature	1 1/1/6/	1	,	Date 17	2009		
	F Opportunity Offshore Fund, Ltd. ne of Signer (Print or Type)	Title of Signer (Pr	int or Type)	<u> </u>		March 1	, 2009		
	al Wilson	Director		_					
							F		JD

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).